FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVE 7

2012 NOV 13 PM 12: 28

FORM 1		ORGANIZATION			FEC MAIL CENTER			
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		nple:If typing, type the lines.	12FE4N	15		
MAINE DE	MOCF	RATIC EXECU	ITIVE	BOARD		1 1 1 1		لب
ADDRESS (number a	nd street)	P. O. BOX 61	3162	<u>)</u> 2				 
(Check if address is changed)		NORTH MIAMI			FL 33261			
			CITY		STATE		ZIP CODE	
COMMITTEE'S E-MA	address	S (Please provide only one e USDemocrati		ecutiveBoard	ds@ho	otmail.	com , ,	1 1
COMMITTEE'S WEB	PAGE ADD	RESS (URL)						
(Check if is change								 
2. DATE 11	l" ′ 9 ′	° ′ <b>20</b> 12						
3. FEC IDENTIFIC	CATION NU	MBER C						
4. IS THIS STATE	MENT 🔀	NEW (N) OR		AMENDED (A)				
I certify that I have of		DAVID EINS	-	•	is true, com	ect and com	olete.	
Signature of Treasure	er	D Finstein			Date 1	1 <sup>™</sup> ′ 09	)°′Ž0°	1Ž <sup>*</sup>
NOTE: Submission of	-	ous, or incomplete information	•			•	ies of 2 U.S.(	C. §437g.
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